



School Facility Use Application

NORTH COUNTY FEEDER SYSTEM

SUBMIT ONE APPLICATION FOR EACH SPACE REQUESTED

| | | | | | |
|---------------------------------------|----------------------|-------------------------|--|------------------------|-----|
| | | | | | |
| NAME OF ORGANIZATION / GROUP / AGENCY | | REPRESENTATIVE'S NAME | | REPRESENTATIVE'S TITLE | |
| | | | | | |
| REPRESENTATIVE'S ADDRESS | | CITY | | STATE | ZIP |
| | | | | | |
| DAYTIME TELEPHONE | NIGHT TIME TELEPHONE | DESCRIPTION OF ACTIVITY | | | |

ACTIVITY SPONSORED BY:

- | | |
|--|--|
| <input type="checkbox"/> Governmental Agency | <input type="checkbox"/> Commercial or Religious Group |
| <input type="checkbox"/> Board of Education | <input type="checkbox"/> Community Group |

Commercial and religious groups will be charged for facility usage. Fees are payable in advance to the Board of Education's Operations Office. Checks should be made payable to Anne Arundel County Public Schools. Contact the School for the Fees.

Cost Per Participant Estimated Attendance Use of Proceeds

SCHOOL (Select One)

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Belle Grove Elementary | <input type="checkbox"/> Ferndale Elementary | <input type="checkbox"/> Lindale Middle | <input type="checkbox"/> North Glen Elementary |
| <input type="checkbox"/> Brooklyn Park Elementary | <input type="checkbox"/> George Cromwell Elementary | <input type="checkbox"/> Linthicum Elementary | <input type="checkbox"/> Overlook Elementary |
| <input type="checkbox"/> Brooklyn Park Middle | <input type="checkbox"/> Hilltop Elementary | <input type="checkbox"/> North County High | <input type="checkbox"/> Park Elementary |

SPACE REQUESTED (Select One)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Multipurpose Room | <input type="checkbox"/> Auditorium | <input type="checkbox"/> Baseball Field | <u>SPECIFY FIELD</u> <input style="width: 150px;" type="text"/> |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Classroom | <input type="checkbox"/> Softball Field | <input style="width: 150px;" type="text"/> |
| <input type="checkbox"/> Gymnasium | <input type="checkbox"/> Media Center | <input type="checkbox"/> Multipurpose Field | <input style="width: 150px;" type="text"/> |
| <input type="checkbox"/> Auxiliary Gymnasium | <input type="checkbox"/> Other (Specify) | <input style="width: 150px;" type="text"/> | |

DATES & TIMES REQUESTED

| DATE(S) OF REQUESTED USE | | DAY(S) OF WEEK REQUESTED | | | | | | | HOURS REQUESTED | | | |
|--------------------------|---------|--------------------------|-----|-----|-----|-----|-----|-----|-----------------|-------|---------|-------|
| FROM DATE | TO DATE | SUN | MON | TUE | WED | THU | FRI | SAT | FROM TIME | AM/PM | TO TIME | AM/PM |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Indemnity Agreement - Each party or person using the school facility described in this application acknowledges and agrees that neither Anne Arundel County n the Board of Education or its agents and employees shall be responsible for any expenses, losses, damages, claims, lawsuits, or liabilities that are in any way caused by or result form the use of the school property authorized by the permit. Additionally, each party or person using the school facility described in this application acknowledges and agrees that each such party or person is jointly and individually responsible for any and all expenses of, cost of defense, losses to, damages or claims made against Anne Arundel County or their agents and employees that are in any way caused by or result from the use of the school property under this permit.

Tobacco, Drug and Alcohol Prohibition - No tobacco, drugs or alcohol of any kind are permitted in or on any Board of Education buildings or grounds at any time – 24 hours per day, 7 days per week. Evidence of tobacco, drugs or alcohol after the building and/or grounds have been used by an agency or organization may result in termination of the permission to continue use of the building and/or grounds. (Board Policies 502 VII & 800.30 and Admin Reg 800.30)

| | |
|--|---|
| <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> APPLICANT'S SIGNATURE | <input style="width: 100%; height: 20px;" type="text"/> DATE |
|--|---|

FOR OFFICIAL USE ONLY

DATE RECEIVED:

APPLICATION #: